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PTO/SB/21 (08-00)

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

<b>Application Number</b>	10/589,673		
	<b>Filing Date</b>	August 16, 2006	
	<b>First Named Inventor</b>	Masaki KANEDA et al.	
	<b>Group Art Unit</b>		
	<b>Examiner Name</b>		
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	0670-7083

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Declaration and Power of Attorney	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Other Enclosures
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	1.
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	2.
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	3.
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> CD, Number of CD(s) _____	4.
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<b>Remarks</b>	5.
	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-2280 for the above identified docket number.	6.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

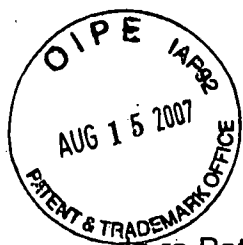
Firm or Individual name	Eric J. Robinson, Reg. No. 38,285 Robinson Intellectual Property Law Office, P.C. PMB 955 21010 Southbank Street Potomac Falls, VA 20165
Signature	
Date	August 13, 2007

## CERTIFICATE OF MAILING

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Attorney Docket No. 0670-7083

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Masaki KANEDA et al.

Serial No. 10/589,673

Filed: August 16, 2006

For: GUIDE ROUTE SEARCH DEVICE,  
GUIDE ROUTE SEARCH METHOD,  
AND COMPUTER PROGRAM  
THEREOF

) Group Art Unit:

) Examiner:

) CERTIFICATE OF MAILING

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**INFORMATION DISCLOSURE STATEMENT**

Honorable Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

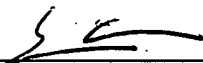
Dear Sir:

In accordance with the provisions of 37 C.F.R. 1.56 and 37 C.F.R. 1.97-1.99, Applicant submits herewith a Form PTO-1449 listing information known to Applicant and requests that this information be made of record in the above identified application. Copies are submitted herewith in accordance with 37 C.F.R. 1.98(a).

In accordance with 37 C.F.R. § 1.97(e), it is certified that either (1) each item of information contained in the information disclosure statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this information disclosure statement, or (2) no item of information contained in the information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign patent application and no item of information contained in the information disclosure statement was known to any individual designated in 37 C.F.R. § 1.56(c) more than three months prior to the

filing of this information disclosure statement.

Respectfully submitted,



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Eric J. Robinson  
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